DEPARTMENT OF PUBLIC SAFETY



BREWER OF MALT LIQUOR EXCISE TAX & PREMIUM REPORT

NAME OF LICENSE HOLDER NAME OF BREWERY STREET ADDRESS		_	CURRENT LICENSE EXPIRES	
		_		
			MONTH O	F WITHDRAWL
TOWN	ZIP		PHONE #	
(1)	TOTAL GALLONS OF MALT L FROM BOND THIS LICENSE Y		(1)	
(2)	TOTAL GALLONS OF TAX PAID MALT PREVIOUSLY REPORTED TO LIQUOR LICENSING AND INSPECTION UNIT THIS YEAR.		(2)	
(3)	TOTAL GALLONS WITHDRAWN THIS MONTH. (SUBTRACT LINE 2 FROM LINE 1)		(3)	
(4)	PLUS TRANSFERS IN FROM OTHER BREWERIES. (ATTACH INVOICES)		(4)	
(5)	LESS TOTAL CREDITS CLAIM (ATTACH DOCUMENTARY EV		(5)	
(6)	LESS TRANSFERS OUT TO OT (ATTACH INVOICES)	HER BREWERIES.	(6)	
(7)	TOTAL TAXABLE GALLONS THIS MONTH.		(7)	
(8)	NET EXCISE TAX DUE. (MULTIPLY LINE 7 X .25)		(8)	
(9)	NET PREMIUM DUE (MULTIPLY LINE 7 X .10)		(9)	
(10)	TOTAL NET TAX DUE. (ADD LINES 8 & 9)		(10)	
	PAID BY CHECK #		DATED:	
	SIGNED BY:		DATED:	

THIS REPORT MUST BE FILED BY THE 10^{TH} OF THE MONTH IMMEDIATELY FOLLOWING WITHDRAWAL FROM THE BONDED AREA.

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